



Filing ID #10022473

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • 135 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Mr. Peter Jacob
Status: Congressional Candidate
State/District: NJ07

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2018
Filing Date: 05/13/2018

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

| Asset | Owner | Value of Asset | Income Type(s) | Income Current Year to Filing | Income Preceding Year |
|--|-------|--------------------|----------------|-------------------------------|-----------------------|
| THE TRUSTEES OF SERV BEHAVIORAL HEALTH SYSTEMS 401(K) RETIREMENT PLAN ⇒ THE TRUSTEES OF SERV BEHAVIORAL HEALTH SYSTEMS 401(K) RETIREMENT PLAN [OT] DESCRIPTION: 401k plan with previous employer | | \$1,001 - \$15,000 | Tax-Deferred | | |

* Asset class details available at the bottom of this form. For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE C: EARNED INCOME

| Source | Type | Amount Current Year to Filing | Amount Preceding Year |
|------------------|----------------------|-------------------------------|-----------------------|
| Video Shack Inc. | Salary from Employer | \$46,000.00 | \$46,000.00 |

SCHEDULE D: LIABILITIES

None disclosed.

SCHEDULE E: POSITIONS

| Position | Name of Organization |
|-------------------------|----------------------|
| Vice President of Sales | Video Shack Inc. |

SCHEDULE F: AGREEMENTS

| Date | Parties To | Terms of Agreement |
|--------------|--|--|
| January 2016 | Self and SERV Behavioral Health Systems Inc. | 401k pension held until retirement or until withdrawn. |

SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

SCHEDULE A ASSET CLASS DETAILS

- THE TRUSTEES OF SERV BEHAVIORAL HEALTH SYSTEMS 401(K) RETIREMENT PLAN

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

Trusts: Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

☐ Yes ☒ No

Exemption: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

☐ Yes ☒ No

CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Mr. Peter Jacob , 05/13/2018